PE)

AUG 0 1 2005

REQUEST FOR ED EXAMINATION (RCE) TRANSMITTAL

To Commissioner For Patents

Please enter the following submission and withdraw the finality of the proceeding office action or withdraw any pending appeal and reopen prosecution before the Examiner.

Application Number	09/923,610
Filing Date	07 August 2001
First Named Inventor	George rose
Group Art Unit	2654
Examiner Name	M. Lerner
Attorney Docket Number	DE000116

This is an RCE under 37 C.F.R. § 1.114 of the above-identified application (which is made prior to: payment of issue fee; abandonment; notice of appeal to the CAFC; or commencement of civil action under 35 U.S.C. 145 or 146.)

1. Submission required under 37 C.F.R. § 1.114		
a. Previously submitted		
i. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on (Any unentered amendment(s) referred to above will be entered).		
ii. Consider the arguments in the Appeal Brief or Reply Brief previously field on		
iii. Other		
b. X Enclosed		
i. 🛛 Amendment/Reply		
ii. Affidavit(s)Declaration(s)		
iii. Information Disclosure Statement (IDS)	·	
iv. Other	(may not be a brief)	
2. Miscellaneous		
a. Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of		
months. (May not exceed 3 months; Fee required per 37 C.F.R. § 1.117(i)		
b Other		
3. Fees		
a. X The Commissioner For Patents is hereby authorized to charge all required fees except the issue fee or		
credit any overpayments, to Deposit Account No. 14-1270. SIGNATURE-OF APPLICANT, ATTORNEY, OR AGENT REQURIED		
SIGNATURE OF APPLICANT, ATTORNEY, OR	R AGENT REQURIED	
Name (Print Type) NOKIN VODOPIA //) Reg.	istration No. (Attorney/Agent) 36,299	
Signature Date	₉ 26 July 2005	
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that this is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents,		
Box RCE, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Paternand Trademark Office tel# 703-872-9306_on the date below:		
Name (Print Type)		
Signature Date 1/26/1		
POW	// /	

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